PART B - FEE(S) TRANSMITTAL

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appropriate. All further indicated unless correct maintenance fee notifica	correspondence includir ed below or directed of tions.	ng the Patent, advance on nerwise in Block 1, by (a	rders and notification of a specifying a new corre	maintenance fees w spondence address;	ill be mailed to the cu and/or (b) indicating a	rrent corresp . separate "F	pondence address as EE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
	7590 09/08 NDO & ANASTA REET, SUITE 1100 MA 02142		Certificate of Mailing or Transmission Thereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USFFO (571) 273-2885, on the date indicated below.				
							(Depositor's name)
		•	_				(Signature)
			<u> </u>				(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET N	IO. CON	FIRMATION NO.
10/717,410 11/18/2003 Robert B. Chaffee C0852-703030 7257 TITLE OF INVENTION: INFLATABLE DEVICE FORMING MATTRESSES AND CUSHIONS							
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUI	FEE TOTAL FEE(S)	TOTAL FEE(S) DUE DATE DU	
nonprovisional	YES	\$720	\$300	\$0	\$1020	\$1020 12/08/200	
EXAM	EXAMINER		CLASS-SUBCLASS	7			
SAFAVI, MICHAEL		3637	005-710000	_			
CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered patent attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
PLEASE NOTE: Un recordation as set fort (A) NAME OF ASSI	less an assignee is ident h in 37 CFR 3.11. Comj GNEE	ified below, no assignee pletion of this form is NO	data will appear on the part of a substitute for filing an (B) RESIDENCE: (CIT's)	assignment. If an assign assignment. Y and STATE OR C	OUNTRY)		
	are submitted: No small entity discount p	permitted)	 D. Payment of Fec(s): (Please first reapply any previously paid issue fee shown above) ☐ A check is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached. ☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-2762 (enclose an extra copy of this form). 				
5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is				Ref. No. COS 52 - 703030 no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).			
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interest as shown by the	records of the United Sta	tes Patent and Trademark	COffice.	D	1 5 2000		
Authorized Signature		Date December 5, 2008					
Typed or printed nam	Robert V.	Donahoe		Registration No. 46,667			
an application. Confiden submitting the complete this form and/or suggest Box 1450, Alexandria, V Alexandria, Virginia 223	tiality is governed by 35 d application form to the ions for reducing this bu /irginia 22313-1450. DO 113-1450.	U.S.C. 122 and 37 CFR USPTO. Time will vary rden, should be sent to the NOT SEND FEES OR	on is required to obtain or 1.14. This collection is esty depending upon the indite the collection offic COMPLETED FORMS Tespond to a collection of in	timated to take 12 to vidual case. Any color, U.S. Patent and OTHIS ADDRESS	minutes to complete, in- mments on the amount Trademark Office, U.S S. SEND TO: Commissi	cluding gath of time you Departmentioner for Pat	pering, preparing, and a require to complete at of Commerce, P.O. lents, P.O. Box 1450,